MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

10/526439

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51						
2		1					52						
3		2					53						
4		3					54						
5		4					55						
6		5					56						
7		6					57						
8		7					58						
9		8					59						
10		9					60						
11		10					61						
12		11					62						
13		12					63						
14	1						64						
15		1					65						
16		2					66						
17			1				67						
18			1				68						
19				1			69						
20				1			70						
21				1			71						
22				1			72						
23				1			73						
24				1			74						
25				1			75						
26				1			76						
27				1			77						
28				1			78						
29				1			79						
30				1			80						
31				1			81						
32				1			82						
33				1			83						
34			1				84						
35				1			85						
36				1			86						
37				1			87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.		⬇	2	⬇		⬇	TOTAL IND.		⬇		⬇		⬇
TOTAL DEP.		⬅	18	⬅		⬅	TOTAL DEP.		⬅		⬅		⬅
TOTAL CLAIMS			20				TOTAL CLAIMS						